

MONROE COUNTY HEALTH DEPARTMENT

2022 Certificate of Compliance Application

Business Name: _____ Responsible Manager: _____

Business Address: _____

Business Phone Number: _____ Fax Number: _____

Email Address: _____ Owners Name(s): _____

Emergency Contact: _____ Emergency Contact#: _____

Hours of Operation (AM/PM) S _____ M _____ T _____ W _____ TH _____ F _____ S _____

***Do you have a Certified Food Protection Manager on duty at all times? YES NO
Category 1 & 2 (high & medium risk) establishments**

CERTIFIED FOOD PROTECTION MANAGERS (CFPM)

Name	CFPM ID #/Exp. date	Allergen ID #/Exp. date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

***NOTE: IL Certified Food Protection Managers (CFPM) Category 1(high risk) *restaurants* shall undergo accredited Allergen Awareness Training within 30 days of being hired, with recertification required every three years. Also, at least one (CFPM) manager who has received the allergen training shall always be on site while the restaurant is open.**

***NOTE: Category 2(medium risk) establishments shall maintain a Person in Charge (PIC) that is on duty at all times. That PIC is also required to be a Certified Food Protection Manager (CFPM).**

For questions, contact: Elizabeth van Uffelen at 939-3871 ext. 217 or evanuffelen@monroecountyhealth.org

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***Certified Food Handlers (CFH ~ NOT CFPM)**

For approved courses, go to: www.dph.illinois.gov/topics-services/food-safety see
"ANSI Accredited Food Handler Training Programs" on right side of page.

Certified Food Handlers:

<u>Name:</u>	<u>ID#:</u>	<u>Expiration Date:</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____
16. _____	_____	_____
17. _____	_____	_____
18. _____	_____	_____
19. _____	_____	_____
20. _____	_____	_____